BetsyAnn Wrask, Clerk Nigel Hicks-Tibbles, First Assistant Clerk Alona Tate, Second Assistant Clerk Theresa Utton-Jerman, Journal Clerk Chris Ditmeyer, Clerk Associate



House of Representatives State House Montpelier, VT 05633-5501 Tel: (802) 828-2247 House Staff@leg.state.vt.us

VERMONT HOUSE OF REPRESENTATIVES

OFFICE OF THE CLERK OF THE HOUSE

House of Representatives Disclosure Form House Rule 90(b)(1)(C)

Name: Gabrielle Stelo	bius		
I serve on, or am a member of, the following boar	ds, commiss	sions, or similar en	tities that
are regulated by law or that receive funding from	the State:	(1,0,4)	ordert
vocanta	in it	Remuneration	do
Board, Commission, or Similar Entity Name	No	Yes	Yes
and Position (e.g. Member or Chair)		Only Expenses e.g. mileage	
Freign Action Network	×		
Energy Action Network			
nemper			
My Employer: Energy Fith (Salary disclosure not required)	ives	Group	
Signed this			
Gabrielle Stebbins			
Printed Name (please sign on back)			